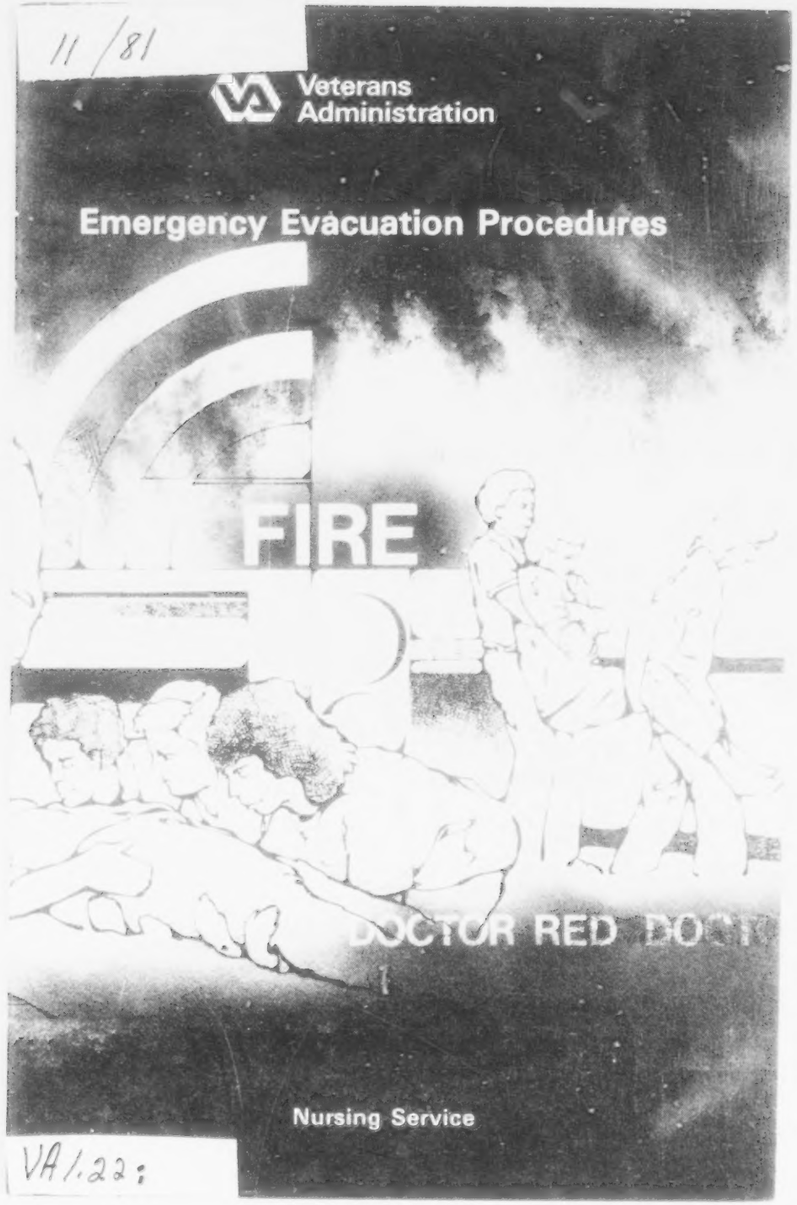
11/81

Veterans Administration

Emergency Evacuation Procedures



Nursing Service

VA 1.22:

The safety of VA patients, especially in an emergency, is of utmost importance. The videotape and this booklet have been designed as a flexible supplement to nursing education classes that cover emergency evacuation procedures, policies and regulations at each VA Medical Center.

Emergency Evacuation Procedures

A fire, earthquake, tornado or other emergency situation calls for cool thinking, quick action and a calm, sure approach. This is even more important in a medical center where the lives of many helpless, sick, and injured patients are at stake. The role of nurses, and their response to the emergency, is vital to the safety of patients and fellow staff members.

The key to responding to any emergency situation is preparation and practice. Solid knowledge of your facility's emergency plan, evacuation routes and procedures is absolutely necessary. Demonstrated skill in the carries and techniques for evacuating all patients is most important. Actual hands-on practice of each technique is vital in order to quickly and efficiently evacuate patients in a real emergency, when there is no time to stop and think.

The objective of this program is to provide nursing staff with a videotape demonstration of a variety of common carries, along with information for choosing the appropriate carry in an emergency. Proper body mechanics, in order to avoid unnecessary staff injury, is stressed throughout. The booklet reinforces the information contained in the videotape and will provide the instructor or student with material for later review.

The carries and techniques included here were selected because they are the most common and widely applicable to a variety of situations, patient populations, and staff abilities. Other techniques may be applicable, but depend on individual training and local medical center or nursing procedures.

READEX MICRO best copy available

Videotape Synopsis

A dramatized fire emergency provides the setting for demonstrating appropriate techniques and behavior for responding to the emergency. The role and behavior of the charge nurse and ward personnel are portrayed as the situation leads to evacuation. The most common emergency removal techniques are described (via narrator) and demonstrated step-by-step.

Running time: 16:45

How To Use This Program

The safety of VA patients, especially in an emergency, is of utmost importance. The videotape and this booklet have been designed as a flexible supplement to nursing education classes that cover emergency evacuation procedures, policies and regulations at each VA Medical Center.

It is critical that all staff have a working knowledge of local policies and procedures, and a demonstrated ability to perform the evacuation techniques. Invite your fire and safety officer to instruct classes on emergency procedures for your facility.

A typical educational program would contain the following:

1) A review of:
   a) fire and disaster plans and policies
   b) roles and responsibilities
2) A presentation by the local Fire and Safety Officer.
3) Viewing of the videotape on evacuation techniques
4) Review of the techniques:
   a) practice
   b) demonstration evaluated by the instructor
   c) proper body mechanics
   d) appropriate techniques in various situations
   e) teamwork.
5) Review of evacuation routes:
   a) staging areas
   b) emergency signals and alarms
   c) location of alarms
6) Discussion and questions.

Simply watching the videotape will not provide staff with the knowledge needed to perform the carries efficiently in an emergency. Each person should practice the carries with teams. The instructor should carefully and critically watch each demonstration. This is a means of evaluating the effectiveness of the teaching.

The booklet provides a visual review of each carry, notes on body mechanics and the appropriate situation for each carry. The following pages can be photocopied for later review and reference by the class. This can serve as a check list for instructors and review for students.

The instructor may choose to have a small class view the tape and practice the techniques on their own, and then have the students demonstrate their mastery of the techniques for instructor evaluation. Individual students may use the tape and book for self-instruction or make-up for missed class sessions, but the importance of hands-on practice with a team cannot be over-emphasized.

Variation In Procedures

Emergency evacuation techniques and procedures will vary with each VA Medical Center and are influenced by many factors:

- Size and type of facility and type of patient population
- Architectural style (i.e., high rise, two story - ¾ of all VA buildings are two-story)
- Location and distance from civilian emergency resources
- Size of staff and patient population
- Natural disasters most likely to occur (in particular, tornados, floods, earthquakes, etc.)

Discuss these variables with your fire and safety officer.

NOTE: Formal authorization for evacuation may come from the Medical Center Director in some facilities, but you can not wait for Director approval when there is a major fire.

Responsibilities

Personal

- Be aware of emergency evacuation, fire drills, alarms, etc., procedures/policies
- Identify type of emergency
- Delegate responsibilities
- Maintain control/monitor the situation both in terms of the ward and the emergency

Patient Care

- Remove patients from immediate danger
- Prevent injury to patient
- Notify appropriate personnel - call for help
- Provide first aid

Personal Accountability

- To charge nurses
- For patient welfare
- To administration for performance of procedures
- For knowing evacuation techniques for ambulatory/non-ambulatory patients
- For communication between staff and patients.

Assessment

- Patient assessment - conditions/numbers
- Severity of situation
- Available help
- Personal capabilities
  - organizational
  - physical capability

Evacuation Preparation

All Patients

- Communicate to gain cooperation of the patient
  NOTE: A patient may resist and require two staff people.
- Maintain calm attitude (to reduce anxiety/panic)
- Take patient census/head count

Ambulatory Patients

- Lead patient to next area swiftly - assign person to monitor group
- Charge nurse assigns staff to monitor patients
- Do not allow patients to return to area until all clear signal is given

Non Ambulatory Patients

- Disconnect all equipment possible from patient
- Provide or prepare life support equipment for transport
- Secure position of bed by locking wheels
- Remove equipment from corridors and patient care areas

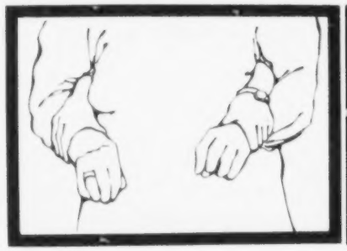
Techniques And Carries For Evacuation

Rear Approach Assist

Appropriate For:

--confused patients
--ambulatory and mildly resistive

Reach under the patient's arms from behind and grasp the wrists, pulling them to the patient's waist. Tuck your head to one side and escort patient to safety.



Side By Side Assist

Appropriate For:

--person requiring limited assistance
--unilateral weakness
--dizziness

Grasp one of the patient's hands, pulling it firmly around your neck. Place your other arm around the patient's back, reach under the arm and grasp the wrist or forearm, bringing it firmly against the patient's waist. Escort the patient to safety.

One Person Pack Strap Carry

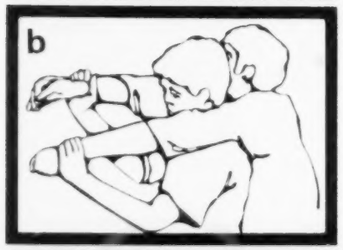
Appropriate For:

--broken legs
--cardiovascular problems
--close quarters

Contraindicated For:

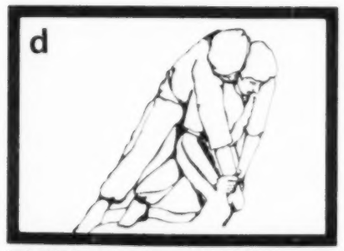
--broken arms
--spinal injuries

Cross your arms, grasp the patient's wrists. Your left arm should be on top if approaching from the left side of the bed, the right arm on top if approaching from the right.

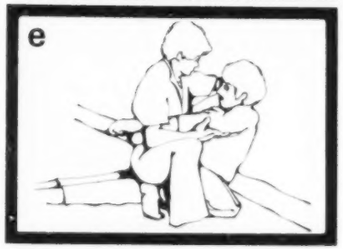


Raise the top wrist and slip under the patient's arm, placing your back firmly against the patient's chest.

Pull the patient's arms straight out in front of you and cross them over your chest.



Lean forward to equally distribute the weight, stand, and carry the patient to safety.

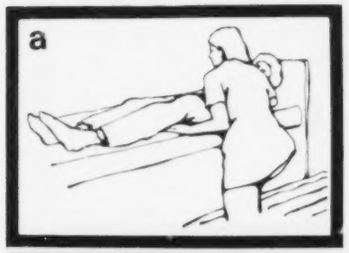


Lower the patient to a lying position by first dropping to one knee while leaning one of the patient's shoulders against a wall. Roll out from under the patient, allowing patient to slide down the wall to a sitting position. Then, gently lay the patient down, supporting the head with your hand.

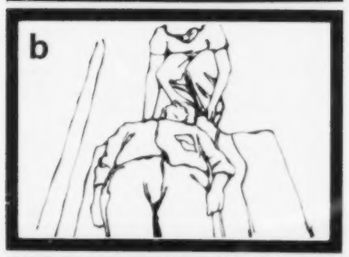
One Person Blanket Drag

Appropriate For:

--person already on floor
--heavy person
--below level of smoke/cooler (in fire emergency)



After placing blanket on floor, partially under the bed, rescuer kneels next to the patient, placing one arm under the neck and one under the thighs



Pull the feet off the bed and roll the patient to your knee, then lower the patient gently to the blanket.

Grasp the blanket firmly above the patient's head, ensuring a slight elevation of the head at all times. Pull the patient, head first, to a safe area and lower the head gently to the floor.

Two Person Swing Carry

Appropriate For:

--easiest - weight distributed evenly
--any weight
--long distance

Rescuers sit, one on each side of the patient, placing the patient's arms around their necks and locking their arms behind the patient.

Rescuers grasp hands beneath patient's legs and stand with patient in "swing", and carry him or her to a safe area.

Using wall for support, lower patient to floor and assist to a lying position, protecting the head.

Two Person Extremity Carry

Appropriate For:

--down stairs/narrow passages
--weight distribution **uneven**

Contraindicated For:

--back or cervical injuries

One rescuer reaches from behind the patient, who is sitting upright in bed, folding the patient's arms and grasping them firmly against the patient's torso.

The second rescuer sits on the bed between the patient's legs and reaches under each leg to cradle them firmly.

Both rescuers stand and carry the patient to safety where he or she is lowered gently to the floor, protecting the head until the patient is in a lying position.

Four Person Blanket Carry

Appropriate For:

--large or seriously ill patient
--spinal injuries
--braces, casts, etc. - **skeletal traction**
--auxiliary equipment can be carried
--requires **four** people
--recent surgery (chest, spinal, abdominal)

Three rescuers reach under the patient, palms up, providing support for the patient's head, neck, shoulders, lower back and legs.

In one continuous motion, the rescuers lift the patient, pivot, and lower the patient to the blanket on the floor. Dropping to one knee allows better control when setting the patient down. The fourth rescuer assists on the opposite side when clear of the bed and is responsible for centering the patient over the blanket.

Roll blanket edges in. Two rescuers on each side grasp the rolled edges, lift, carry the patient, head first, to a safe area, and lower gently to the floor, protecting the head at all times.

Program Evaluation

SURVEY

In order to help us determine the effectiveness of these materials, we ask that you and your class complete the following evaluation form. Please remove it from the brochure or photocopy as many as needed. Forward the completed surveys to: Regional Learning Resources Services (142), VA Medical Center, St. Louis, MO 63125. Thank you for your time and consideration.

	Effective	Acceptable	Not Effective	Not Acceptable
1. I feel this educational package was:	☐	☐	☐	☐
2. This section on nursing responsibilities was:	☐	☐	☐	☐
3. The demonstration of the carries was:	☐	☐	☐	☐
4. The booklet was:	☐	☐	☐	☐
5. For integration into classroom teaching these materials were:	☐	☐	☐	☐
6. For self-instructional use, these materials were:	☐	☐	☐	☐

7. If an instructor, do you plan to use this program again with your classes?

   Why or why not? _____

8. Typically how many students will see these materials in a year? _____

9. How many students at your facility have seen these materials? _____

10. Comments or Suggestions: _____

    _____

    _____

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